## Study of the United States Institutes

## **Application Form**

PLEASE ANSWER ALL QUESTIONS COMPLETELY AND ACCURATELY. PLEASE PRINT OR WRITE LEGIBLY.

1.	Which SUSI program are you applying for?
2.	Full name (Last, First)
3.	Gender
4.	Date of birth (please WRITE out month, day, year – example, December 12, 1972)
5.	Birth city
6.	Birth country
7.	Country(ies) of citizenship
8.	Country of residence
9.	Medical, physical, dietary or other personal considerations: please describe any pre- existing medical conditions, including any prescription medication.
10.	Contact information: home address, city, home country, email, telephone number
11.	Current position, institution name
12.	Work experience, including previous positions and titles (please use back of sheet if necessary)

13.	Education and academic and professional training, including degree earned and fields of specialization.
14.	Active professional memberships
15.	Publications (include year, type of publication, title and publisher). Please list no more than 10.
16.	Previous experience in the United States (please list all trips to the U.S., including dates and reason for travel)
17.	Family residing in the united states: Please list any immediate family members who are currently residing in the United States, including city and state
18. sco	If you have taken the TOEFL/SAT/GRE examination in the past, please indicate your re.

Personal statement: please indicate why you are interested in participating in the program and what you expect to get out of the experience. Please describe how your participation would contribute to your general professional development and your teaching of the U.S. Studies subject. How would you share your experience with others?